

# United States Court of Appeals

FOR THE DISTRICT OF COLUMBIA CIRCUIT

19 Re: Angel Ruiz Rivera

USCA No. \_\_\_\_\_

v.

Commissioner Internal Revenue Service

USDC No. \_\_\_\_\_

## MOTION FOR LEAVE TO PROCEED ON APPEAL IN FORMA PAUPERIS

I, Angel Ruiz Rivera, declare that I am the  
☐ appellant/petitioner ☐ appellee/respondent in the above-entitled proceeding. In support  
of this motion to proceed on appeal without being required to prepay fees, costs or give  
security therefor, I state that because of my poverty I am unable to prepay the costs of said  
proceeding or to give security therefor. My affidavit or sworn statement is attached.

I believe I am entitled to relief. The issues that I desire to present on appeal/review are as  
follows: (Provide a statement of the issues you will present to the court. You may  
continue on the other side of this sheet if necessary.)

*Petition the Honorable Court to Order the Commissioner of the  
Internal Revenue Service to enforce a Notice of Levy, duly and  
timely filed on June 17, 1998, against funds unconstitutionally and  
illegally preconfiscated, seized or forfeited by the U.S. Department of Education.*

Signature *Angel Ruiz Rivera*

Name of Pro Se Litigant (PRINT) Angel Ruiz Rivera

Address P.O. Box 191209

S.J., P.R. 00919-1209.

Submit original with a certificate of service to:

Clerk, U.S. Court of Appeals  
for the D.C. Circuit  
Rm. 5423, E. Barrett Prettyman U.S. Courthouse  
Washington, DC 20001

**Affidavit Accompanying Motion for  
Permission to Appeal in Forma Pauperis**

United States Court of Appeals for the  
District of Columbia Circuit

In Re: Angel Ruiz Rivera

Case No. \_\_\_\_\_

v.

Commissioner Internal Revenue Service

**Affidavit in Support of Motion**

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

**Instructions**

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: \_\_\_\_\_

Date: 11/12/2004

My issues on appeal are:

*Petition the Honorable Court to Order the Commissioner of the Internal Revenue Service to enforce a Notice of Levy, duly and timely filed on June 17, 1998 against funds illegally preconfiscated, seized or forfeited by the U.S. Department of Education.*

# United States Court of Appeals

FOR THE DISTRICT OF COLUMBIA CIRCUIT

**No. 04-7135**

**September Term, 2004**

**Filed On: November 15, 2004**

[859747]

In re: Angel Ruiz Rivera,  
Petitioner

**BEFORE:** Ginsburg, Chief Judge, and Sentelle and Henderson,  
Circuit Judges

## **ORDER**

Upon consideration of the petition for a writ of mandamus and the motion for leave to proceed in forma pauperis, it is

**ORDERED** that the motion for leave to proceed in forma pauperis be granted. It is

**FURTHER ORDERED** that the petition for a writ of mandamus be denied, as this court has no authority over the District of Columbia Office of Bar Counsel.

Pursuant to D.C. Circuit Rule 36, this disposition will not be published.

**Per Curiam**

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$_____	\$_____	\$_____	\$_____
Self-employment	\$_____	\$_____	\$_____	\$_____
Income from real property (such as rental income)	\$ <u>2,000</u> -	\$_____	\$_____	\$_____
Interest and dividends	\$_____	\$_____	\$_____	\$_____
Gifts	\$_____	\$_____	\$_____	\$_____
Alimony	\$_____	\$_____	\$_____	\$_____
Child support	\$_____	\$_____	\$_____	\$_____
Retirement (such as social security, pensions, annuities, insurance)	\$_____	\$_____	\$_____	\$_____
Disability (such as social security, insurance payments)	\$_____	\$_____	\$_____	\$_____
Unemployment payments	\$_____	\$_____	\$_____	\$_____
Public-assistance (such as welfare)	\$_____	\$_____	\$_____	\$_____
Other (specify): _____	\$_____	\$_____	\$_____	\$_____
Total monthly income:	\$ <u>2,000</u> -	\$_____	\$_____	\$_____

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
<u>Unemployed since 1997</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
<u>Because of a pre-nuptial agreement there is no conjugal partnership, this I do not have this information.</u>			
_____	_____	_____	_____
_____	_____	_____	_____

4. How much cash do you and your spouse have? \$\_\_\_\_\_

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
<u>I do not have any.</u>	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, that you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home (Value)	Other real estate (Value)	Motor vehicle # 1 <u>2000</u> (Value)
_____	_____	Make & year: <u>Citroen b.16</u> 1995
_____	_____	Model: <u>Coffass</u>
_____	_____	Registration #: _____

  

Motor vehicle #2 <u>2000</u> (Value)	Other Assets (Value)	Other Assets (Value)
Make & year: <u>Buick</u> 1995	_____	_____
Model: <u>Grand Prix</u>	_____	_____
Registration #: _____	_____	_____

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>Agustina Ruiz</u>	<u>Son</u>	<u>23</u>
<u>Vicente Ruiz</u>	<u>"</u>	<u>22</u>
<u>Benjamin Ruiz</u>	<u>"</u>	<u>18</u>
<u>Sylvia Ruiz</u>	<u>Daughter</u>	<u>16</u>

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>0</u> -	\$ _____
Are real-estate taxes included?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is property insurance included?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>300</u> -	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ <u>600</u> -	\$ _____
Clothing	\$ <u>100</u> -	\$ _____
Laundry and dry-cleaning	\$ <u>100</u> -	\$ _____
Medical and dental expenses	\$ <u>100</u> -	\$ _____
Transportation (not including motor vehicle payments)	\$ <u>200</u> -	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>100</u> -	\$ _____
Insurance (not deducted from wages or included in mortgage payments)	\$ _____	\$ _____
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments) (specify): _____	\$ _____	\$ _____
Installment payments	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Credit card (name): <u>Amex/Rydz</u>	\$ <u>250</u> -	\$ _____
Department store (name): <u>First Bank 5836 4680 0011 8643 4/10</u>	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others <input checked="" type="checkbox"/>	\$ <u>500</u> -	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____
Total monthly expenses:	\$ <u>2,250</u> -	\$ _____

Although I have child support obligations by court of \$2,250 and \$1,068 a month, I only contribute \$500 which is what I can afford barely.

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

☐ Yes ☒ No If yes, describe on an attached sheet.

10. Have you paid—or will you be paying—an attorney any money for services in connection with this case, including the completion of this form?

☐ Yes ☒ No

If yes, how much? \$ \_\_\_\_\_

If yes, state the attorney's name, address, and telephone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

☐ Yes ☒ No

If yes, how much? \$ \_\_\_\_\_

If yes, state the person's name, address, and telephone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Provide any other information that will help explain why you cannot pay the docket fees for your appeal. *As a result of the barbaric actions of U.S. officials, I have become virtually destitute. I have been granted IFP status by the USCA11 in 98-1242. By the USDCAR in 98-1300, 99-1012, 00-1609, and others. Recently I was granted IFP status in 04-0610 (K) at the USDCDC. By the U.S. Supreme Court in case 02-6545.*

13. State the address of your legal residence.

*Calle 1 P-11 Estancias de Gdra, Gdra, P.R. 00739*

\_\_\_\_\_  
\_\_\_\_\_

Your daytime phone number: *(717) 714-1069*

Your age: *50* Your years of schooling: *21*

Your social-security number: *583-56-2886*